UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolt	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	15715 - Bank Financial -
CT Lien Solutions	47646992
¹ P.O. Box 29071 Glendale, CA 91209-9071	ILIL
	FIXTURE
File with: Cook, IL	



Doc#: 1511217038 Fee: \$42.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A.Yarbrough

Cook County Recorder of Deeds Date: 04/22/2015 01:48 PM Pg: 1 of 3

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P.O. Box 29071 Glendale, CA 91209-9071	_IL				
Olchdalo, e. i v i = - ·	IXTURE I				
			- su ma office 116	SE ONLY	
File with: Cook, IL	THE	ABOVE SPACE IS FO	R FILING OFFICE O	Individual Debtor's	
	exact, full name; do not omit, modify, or abbre	viate any part of the Debtor	s name); if any part of the rement Addendum (Form (JCC1Ad)	
ame will not fit in line 1b, leave all of item 1 bl. nk, check here an	id provide the Individual Deptor Information III	telli To of the Financing on		<u> </u>	
1a. ORGANIZATION'S NAME					
NLP AND ASSOCIATES LLC	FIRST PERSONAL NAME	ADDITION	ADDITIONAL NAME(S)/INITIAL(S)		
1b, INDIVIDUAL'S SURNAME				<u> </u>	
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
	Chicago	<u>IL</u>	60611	USA	
DE Ontario, #909 DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use	at full name; do not omit modify, or abbro	eviate any part of the Debtor	's name); if any part of the	Individual Debtor's	
DEBTOR'S NAME: Provide only <u>one</u> Debtor Harrie (2a or 2b) (dae ame will not fit in line 2b, leave all of item 2 blank, check here are	nd provide the Individual Debtor information in	item 10 of the Financing Sta	tement Addendum (Form	UCC1Ad)	
2a. ORGANIZATION'S NAME	$-\Theta_Z$		-		
	τ_{\circ}			Taveriy	
2b. INDIV DUAL'S SURNAME	FIRST ERSO! AL NAME	ADDITIO	NAL NAME(SYINITIAL(S)	SUFFIX	
Parekh	Nimita (Tanarii sana	COUNTRY	
MAILING ADDRESS	CITY	STATE	POSTAL CODE		
0 E. Ontario, #909	Chicago	IL	60611	USA	
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIG	NOR SECURED PARTY): Provide only or 2 S	ecured Party name (3a or 3	b)		
3a. ORGANIZATION'S NAME					
		/)			
BANKFINANCIAL, F.S.B.		LADDITIO	NIAL MARKERWANTIALIS	SUFFIX	
	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
		0/2/			
3b. INDIVIDUAL'S SURNAME	CITY	STATE	POSTAL CODE	COUNTRY	
3b. INDIVIDUAL'S SURNAME : MAILING ADDRESS 15W060 NORTH FRONTAGE ROAD COLLATERAL: This financing statement covers the following collate	BURR RIDGE	STATE (L)	POSTAL CODE 60527	COUNTRY USA	
	BURR RIDGE eral: r acquired later; all accessions, addit	ions, replacements, a	POSTAL CODE 60527	COUNTRY USA	
ab. INDIVIDUAL'S SURNAME 3b. INDIVIDUAL'S SURNAME 15W060 NORTH FRONTAGE ROAD COLLATERAL: This financing statement covers the following collate all Fixtures whether any of the foregoing is owned now obregoing; all records of any kind relating to any of the form accounts proceeds) for Real Property located at 111	BURR RIDGE eral: r acquired later; all accessions, addit	ions, replacements, a of the foregoing (includes)	POSTAL CODE 60527 A sv. os itutions relating first, ance, gene ered by a Decedent's Per y if applicable and check	country USA ing to any of the ral intangibles S S S S S S S S S S S S S	
Sc. MAILING ADDRESS 15W060 NORTH FRONTAGE ROAD COLLATERAL: This financing statement covers the following collate all Fixtures whether any of the foregoing is owned now orregoing; all records of any kind relating to any of the found accounts proceeds) for Real Property located at 111	BURR RIDGE eral: r acquired later; all accessions, addit regoing; all proceeds relating to any 3 Dickens Way, Schaumburg, IL 601	ions, replacements, a of the foregoing (includes) ructions) being administ 6b. Check on	POSTAL CODE 60527 A sr postitutions relating instrument, ance, gene ered by a Decedent's Per y if applicable and check	country USA ing to any of the ral intangibles S S S S S S S S S S S S S S S S S S	
c. MAILING ADDRESS 15W060 NORTH FRONTAGE ROAD COLLATERAL: This financing statement covers the following collate II Fixtures whether any of the foregoing is owned now ouregoing; all records of any kind relating to any of the form accounts proceeds) for Real Property located at 111 Check only if applicable and check only one box: Collateral is head. Check only if applicable and check only one box:	BURR RIDGE eral: r acquired later; all accessions, addit regoing; all proceeds relating to any 3 Dickens Way, Schaumburg, IL 601	ions, replacements, a of the foregoing (includes) ructions) being administ 6b. Check on	POSTAL CODE 60527 A sy os : tutions relating instrume, gene ered by a Decedent's Per y if applicable and check	country USA ing to any of the ral intangibles S S S S S S S S S S S S S	
a. Check only if applicable and check only one box: Check only if applicable and check only one box: Check only if applicable and check only one box: Public-Finance Transaction Manufactured.	BURR RIDGE eral: r acquired later; all accessions, addit regoing; all proceeds relating to any 3 Dickens Way, Schaumburg, IL 601	ions, replacements, a of the foregoing (includes) suctions) being administ 6b. Check on the control of the co	POSTAL CODE 60527 A sr postitutions relating instrument, ance, gene ered by a Decedent's Per y if applicable and check	country USA ing to any of the ral intangibles S S S S S S S S S S S S S S S S S S	

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UCC FINANCING STATEMENT ADDENDUM

FULLUW INSTRUCTIONS						
 NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line because Individual Debtor name did not fit, check here 	e 1b was left blank					
9a, ORGANIZATION'S NAME						
NLP AND ASSOCIATES LLC						
NEF AND AGGGGIATEG EEG						
OR 9b, INDIVIDUAL'S SURNAME						
FIRST PERSONAL NAME						
ADDITIONAL NAME(S)(INI (IAL(S)	SUFFIX					
			_	IS FOR FILING OFFI		
10. DEBTOR'S NAME: Provide (10a or 1' o) o lty one additional Debtor name or	Debtor name that did no	ot fit in line 1b or 2b of the	Financing St	atement (Form UCC1) (us	e exact, full name;	
do not omit, modify, or abbreviate any part of the Dt btor's name) and enter the ma	uling address in line 100	·				
1						
OR 10b. INDIVIDUAL'S SURNAME	···					
INDIVIDUAL'S FIRST PERSONAL NAME		· · · · · · · · · · · · · · · · · · ·				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	0/				SUFFIX	
10c. MAILING ADDRESS	CIT/		STATE	POSTAL CODE	COUNTRY	
11. ADDITIONAL SECURED PARTY'S NAME OF ASSIGNO	DR SECURE) P JR	TY'S NAME: Provide o	nly one nam	L e (11a or 11b)		
11a. ORGANIZATION'S NAME	7	/	<u> </u>			
OP	Y	<u> </u>	Lapportio	NAL NAME(S)/INITIAL(S)	SUFFIX	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAM	NE CONTRACTOR OF THE CONTRACTO	ADDITIO	NAE NAME(S)/INITIAE(S)	SOFFIX	
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):			Z.			
, ,			TO			
			0			
				Office		
				C		
13. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	e 14. This FINANCING	STATEMENT:	-			
REAL ESTATE RECORDS (if applicable)	covers timbe	r to be cut covers	as-extracted	collateral 🔀 is filed as	a fixture filing	
Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 16. Description of real estate: Parcel ID: 07-27-302-031-0000						
	PARCEL 1: TH	AT PART OF LOT 1	8254 (EY)	FPT THAT PART O	E SAID LOT	
	PARCEL 1: THAT PART OF LOT 18254 (EXCEPT THAT PART OF SAID LOT 18254 LYING SOUTH OF A LINE DRAWN AT 90 DEGREES TO THE EAST					
	LINE OF SAID LOT AT A POINT ON SAID EAST LINE 195.43 FEET NORTH OF THE SOUTHEAST CORNER OF SAID LOT) IN SECTION 3, WEATHERSFIELD UNIT 18, BEING A SUBDIVISION IN THE SOUTHWEST ¼ OF SECTION 27, TOWNSHIP 41 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, DESCRIBED AS FOLLOWS: COMMENCING ON THE WEST LINE OF SAID LOT 18254 AT A POINT 701.21 FEET NORTH OF THE SOUTHWEST CORNER OF SAID LOT 18254; THENCE [See Exhibit for Real Estate]					
17. MISCELLANEOUS: 47646992-IL-31 15715 - Bank Financial - Mai BANK	FINANCIAL, F.S.B.	File with: Cook, IL	311-1902	072392 842		

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Exhibit for Real Estate

16. Description of real estate:

Continued

EAST 95.70 FEET, TO THE POINT OF BEGINNING OF THE PARCEL HEREON DESCRIBED: (FOR THE PURPOSE OF DESCRIBING THIS PARCEL, WEST LINE OF SAID LOT 18254 IS TAKEN AS ¿NORTH AND SOUTH ¿.); THENCE NORTH 1.83 FEET; THENCE EAST 6.00 FEET; THENCE NORTH 46.32 FEET; THENCE WEST 3.00 FEET; THENCE NORTH 1.83 FEET; THENCE EAST 46.00 FEET; THENCE SOUTH 49.98 FEET; THENCE WEST 49.00 FEET; TO THE POINT OF BEGINNING, IN COOK COUNTY, ILLINOIS.

PARCEL 2: EASEMENT APPURTENANT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET FORTH IN THE Proposition of Coof Colling Clerk's Office DECLARATION OF PROTECTIVE COVENANTS RECORDED AS DOCUMENT NO. 24384493 AND AS CREATED BY DEED RECORDED AS DOCUMENT NO. 24712336, FOR INGRESS AND EGRESS, ALL IN COOK COUNTY, ILLINOIS.